October 11, 2007

#### PRIVILEGING FOR VHA TELERADIOLOGY

**1. PURPOSE:** This Veterans Health Administration (VHA) Directive defines the mechanism for credentialing and privileging of teleradiologists who are appointed to the National Teleradiology Program (NTP).

## 2. BACKGROUND

- a. The NTP is a VHA service providing remote radiology interpretations for Department of Veterans Affairs medical centers (VAMCs) who have difficulty in recruiting radiologists, or who cannot secure reasonably-priced contracts. Teleradiologists at the NTP serve VAMCs throughout VHA.
- b. Physician privileges must be provider specific, as well as facility specific. Previously, VHA teleradiologists were required to be privileged at each VAMC for which they provided service. In the case of the NTP, each physician would need to maintain privileges at dozens of hospitals. This would be an administrative burden. In order to surmount this hurdle, VHA has negotiated a pilot privileging program with the Joint Commission.
- (1) The Joint Commission standards allow that when one enters into a contract with a Joint Commission accredited organization providing services outside of the hospital, one can accept the contractees credentials and privileges by specifying in the contract that the contracted entity, which may be a Teleradiology firm, will ensure that all services provided by individuals who are licensed independent practitioners will be within the scope of the licensed independent practitioner's privileges granted by the contracted entity. It is not necessary for Joint Commission accreditation personnel to maintain a complete credentials file for each provider or to fully credential the provider using the client hospital process. VHA has, until now, deferred incorporating the allowance for the credentialing and privileging by a Joint Commission accredited entity into VHA policy.
- (2) The Joint Commission has agreed to pilot a privileging program within VHA that treats the NTP as a unique entity for purposes of credentialing and privileging. The NTP is a clinical service of the VA Palo Alto Health Care System (VAPAHCS) and is surveyable as part of the VAPAHCS' survey.
- **3. POLICY:** It is VHA policy that radiologists appointed to the NTP to perform teleradiology be credentialed, privileged, and participate in the NTP quality assurance program.

## 4. ACTION

a. <u>Medical Center Director</u>. The Director at the facility to which NTP radiologists are appointed is responsible for oversight of the NTP and the NTP quality assurance program.

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- (1) All teleradiologists who are appointed to the NTP are privileged at VAPAHCS to practice radiology using teleradiology for VHA. *NOTE:* If a second teleradiology center is opened, for example on the East Coast, it will be a clinical service of the East Coast facility and the teleradiologists assigned to that center could be privileged to practice radiology through teleradiology for VHA. In that case, the provisions for quality assurance contained in this directive will apply to the second center as well.
- (2) Teleradiologists appointed to the NTP do not need to be credentialed and privileged at VAMCs served by the NTP as long as they only work within the NTP. *NOTE:* VAMCs and program offices must refrain from employing this privileging mechanism in setting up their own national or regional teleheathcare programs, until the pilot program can be evaluated and a general directive on national privileging issued.
- (3) An NTP teleradiologist who performs studies on-site for a VAMC, or otherwise works outside of the NTP, must be independently privileged at the facility for which the teleradiologist provides care outside of the NTP.
- (a) Example: If a radiologist works for the NTP, they must be privileged to perform radiology within the Teleradiology Service at PAHCS. If the radiologist also performs interventional procedures at Palo Alto they must have privileges for interventional procedures within the Radiology Service at Palo Alto.
- (b) Example: If a radiologist privileged at the NTP also interprets studies for VA Sierra Nevada HCS (SNHCS) by teleradiology in fulfillment of a Memorandum of Understanding (MOU) between PAHCS and SNHCS, then the radiologist must have privileges at SNHCS, the distinction being that the MOU was with PAHCS and not with NTP.
- (4) A copy of the NTP radiologist's credentials and privileges is available to each site served by the NTP. Credentials must be entered in the VetPro credentialing information system.
- (5) Competency data is collected and reviews performed for all locations for which the physician is privileged. To accomplish this, competency statistics of radiologist performance at the NTP are sent to the relevant Chief of Service at remote locations when requested. Likewise, the Chief of Service at remote locations where NTP physicians are privileged will send competency data to the National Chief of Teleradiology.
- (6) Quality assurance (QA) data will be collected from all facilities that receive service from the NTP.
- (a) Information collected from remote sites receiving teleradiology services include, but are not limited to: satisfaction, timeliness of services, accuracy of interpretation, and communication of critical results.

- (b) It is imperative that all referring facilities communicate to NTP the results of physician reviews, as well as any complications or incidents that result in adverse or serious patient outcomes. Such information is incorporated into each teleradiologist's provider profile at all locations, and must be considered whenever undertaking privileging actions at any location.
- (7) The NTP is included in the Joint Commission accreditation survey of the VAMC to which NTP radiologists are appointed.
- b. **National Chief of Teleradiology.** The National Chief of Teleradiology is responsible for ensuring:
- (1) The provider profile of each NTP teleradiologist is used to support the provider's renewal of privileges. The provider profile must include such factors as:
  - (a) Percent error rate,
  - (b) Incident reports,
  - (c) Letters of complaint or praise,
  - (d) Participation in QA meetings and other quality improvement activities,
  - (e) Attendance and timeliness of service,
  - (f) Licensure actions,
  - (g) Completion of continuing education requirements,
  - (h) Maintenance of certification, and
  - (i) Loss of privileges at client VAMCs.
- (2) An annual report of quality improvement monitors is submitted to the Quality Manager at VAPAHCS, to the Quality Manager at each VAMC served by the NTP, and to the Teleradiology Governance Board. This annual report must de-identify all patients, physicians, and VAMCs.

#### 5. REFERENCES

a. Credentialing and Privileging for Providers from the Joint Commission Accredited Organization:

 $\underline{http://jointcommission.org/AccreditationPrograms/HomeCare/Standards/FAQs/Leadership/Leadership/cred\_priv.htm}$ 

b. VHA Handbook 1100.19, Credentialing and Privileging

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**6. FOLLOW-UP RESPONSIBILITY:** The Office of Patient Care Services (115) is responsible for the contents of this Directive. Questions may be addressed to Director, NTP, (650) 615-6050. *NOTE:* Consultation can be obtained from the National Director of Credentialing and Privileging by calling (919) 993-3035, extension 236.

**7. RESCISSIONS:** None. This VHA Directive expires October 31, 2012.

Michael J. Kussman, MD, MS, MACP Under Secretary for Health

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